

2010 OMNIBUS STATE BUDGET BILL
HF 1(Carlson)/SF 1(Cohen)
CHAPTER: First Special Session Chapter 1, LAWS 2010
Signed by the Governor: May 21, 2010

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Note: The following summary represents a small portion of the bill focusing on matters of interest to Commerce licensees.

SECTION	STATUTE	SUBJECT	EFFECTIVE
ARTICLE 19		MISCELLANEOUS	
1	New 62Q.545	Coverage of Private Duty Nursing Services. Private duty nursing services are covered under a health plan for persons who are concurrently covered by both the health plan and enrolled in medical assistance under 256B.	<u>7-01-10</u>
ARTICLE 20		DEPARTMENT OF HEALTH	
2	62D.08 New Subd. 7	Consistent administrative expenses and investment income reporting. Every health maintenance organization (HMO) must directly allocate administrative expenses to specific lines of business or products when such information is available and must allocate investment income based on cumulative net income over time by business line or product using the reporting template provided by the commissioner of health.	<u>1-1-13</u>
3	New 62D.31	Advisory Group on Administrative Expenses. The Advisory Group on Administrative Expenses is established to make recommendations on the development of consistent guidelines and reporting requirements, including development of a reporting template, for health maintenance organizations and county-based purchasing plans that participate in publicly funded programs.	<u>Report Due:</u> <u>2-15-12</u>
19	New	Health Plan and County Administrative Cost Reduction; Reporting Requirements. Minnesota health plans and county-based purchasing plans may complete an inventory of existing data collection and reporting requirements for health plans and county-based purchasing plans	<u>7-1-10</u>
ARTICLE 22		HEALTH CARE REFORM	
1	New 62E.20 See also: PPACA*, Sec. 1101	Relationship to Temporary Federal High-Risk Pool. The commissioner of commerce and the Minnesota Comprehensive Health Association will ensure that applicants for coverage through the federal qualified high-risk pool, or through the Minnesota Comprehensive Health Association, are referred to the medical assistance or Minnesota Care programs if they are determined to be potentially eligible for coverage through those programs. The commissioner of human services shall ensure that applicants for coverage under medical assistance or Minnesota Care who are determined not to be eligible for those programs are provided information about coverage through the federal qualified high-risk pool and the Minnesota Comprehensive Health Association. Minnesota will coordinate its efforts with the United States Department of Health and Human Services (HHS) to obtain the federal funds to implement in Minnesota the federal qualified high-risk pool.	<u>7-1-10</u>

4	New See also: PPACA*	Health Care Reform Task Force. The Governor will convene a Health Care Reform Task Force to advise and assist the governor and the legislature regarding state implementation of federal health care reform legislation. Members will be appointed for one-year terms and may be reappointed. The Departments of Health, Human Services, and Commerce will provide staff support. The task force may accept outside resources to help support its efforts. The Task Force will make recommendations for state law and program changes necessary to comply with the federal health care reform legislation, and for implementing optional provisions of the federal legislation in order to maximize federal funding to the state.	Members Appointed: 7-1-10 First Meeting: 7-15-10 Report Due: 12-15-10
5	New See also: PPACA*, Sec. 1311 See also: 3.195 and 3.197	American Health Benefit Exchange; Planning Provisions. The commissioners of commerce, health, and human services shall jointly or separately apply to the federal secretary of health and human services for one or more planning grants, including renewal grants, relating to state creation of American Health Benefit Exchanges. The commissioners will analyze the advantages and disadvantages to the state of planning to have a state health insurance exchange prior to the federal deadline of January 1, 2014. The commissioners shall provide a written report to the legislature on the analysis.	Report Due: 12-15-10
ARTICLE 25			
3	Laws 2009, Chapter 79, Art. 5, Sec. 78, and Laws 2009, Chapter 79, Art. 13, Sec. 3, Subd. 6	HEALTH AND HUMAN SERVICES APPROPRIATIONS Cobra Carry Forward. Unexpended funds appropriated in fiscal year 2010 for COBRA grants under Laws 2009, chapter 79, article, section 78, do not cancel and are available to the commissioner for fiscal year 2011 COBRA grant expenditures. Up to \$111,000 of the fiscal year 2011 appropriation for COBRA grants provided in Laws 2009, chapter 79, article 13, section 3, subdivision 6, may be used by the commissioner for costs related to administration of the COBRA grants.	7-1-10
4	Laws 2008, Chapter 358, Art. 5, Sec. 4 Subd. 3, and Laws 2008, Chapter 358, Article 4	Health Care Reform. Funds appropriated for health reform activities are available until expended. This provision shall not expire.	7-1-10
4	New	Health Care Reform Task Force. \$198,000 from the general fund is for expenses related to the Health Care Reform Task Force. This is a onetime appropriation.	7-1-10
4	Laws 2008, Chapter 358, Art. 5, Sec. 4 Subd. 3	Section 125 Plans. The remaining balance from the Laws 2008, chapter 358, article 5, section 4, subdivision 3, appropriation for Section 125 Plan Employer Incentives is canceled.	7-1-10
4	New 62D.31	Advisory Group on Administrative Expenses. Of the health care access fund appropriation for fiscal year 2011, \$39,000 is to the commissioner for the advisory group. This is a onetime appropriation.	7-1-10
10	New 62Q.545 and 62A.3075	Health Plan Filings. Of this appropriation, \$19,000 is for the review and approval of new health plan filings due to 62Q.545.; and \$19,000 is for regulation of 62A.3075. These are onetime appropriations.	7-1-10

* Patient Protection and Affordable Health Care Act, Public Law 111-148, or the Health Care and Education Reconciliation Act of 2010, Public Law 111-152.